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CONFIRMATION NO. 7555

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| <b>SERIAL NUMBER</b><br>10/614,050   | <b>FILING OR 371(c) DATE</b><br>07/08/2003<br><b>RULE</b>   | <b>CLASS</b><br>386                                 | <b>GROUP ART UNIT</b><br>2621   | <b>ATTORNEY DOCKET NO.</b><br>1740-000010/US |                                |
| <b>APPLICANTS</b><br>Kang Soo Seo, Kyunggi-do, KOREA, REPUBLIC OF;<br>Sung Wan Park, Suwon-si, KOREA, REPUBLIC OF;<br>Byung Jin Kim, Kyunggi-do, KOREA, REPUBLIC OF;<br>Soung Hyun Um, Kyunggi-do, KOREA, REPUBLIC OF;   |   |   |   |  |                                |
| <b>** CONTINUING DATA *****</b><br><b>** FOREIGN APPLICATIONS *****</b><br>REPUBLIC OF KOREA 2002-39806 07/09/2002   |   |   |   |  |                                |
| <b>IF REQUIRED, FOREIGN FILING LICENSE GRANTED</b><br><b>** 10/03/2003</b>   |   |   |   |  |                                |
| Foreign Priority claimed <input checked="" type="checkbox"/> yes <input type="checkbox"/> no<br>35 USC 119 (a-d) conditions <input checked="" type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after<br>met<br>Verified and Acknowledged <u>Patnam Zhao</u> Allowance<br>Examiner's Signature Initials |   | <b>STATE OR COUNTRY</b><br>KOREA,<br>REPUBLIC<br>OF | <b>SHEETS DRAWING</b><br>7  | <b>TOTAL CLAIMS</b><br>12                    | <b>INDEPENDENT CLAIMS</b><br>6 |
| <b>ADDRESS</b><br>30593  |   |   |   |  |                                |
| <b>TITLE</b><br>Recording medium having data structure for managing reproduction of a data stream having a packet encoding time stamp recorded thereon and recording and reproducing methods and apparatuses   |   |   |   |  |                                |
| <b>FILING FEE RECEIVED</b><br>1132   | FEES: Authority has been given in Paper<br>No. _____ to charge/credit DEPOSIT ACCOUNT<br>No. _____ for following: |   | <input type="checkbox"/> All Fees<br><input type="checkbox"/> 1.16 Fees ( Filing )<br><input type="checkbox"/> 1.17 Fees ( Processing Ext. of time )<br><input type="checkbox"/> 1.18 Fees ( Issue )<br><input type="checkbox"/> Other _____<br><input type="checkbox"/> Credit |  |                                |